



Iowa Department of Natural Resources  
Wallace State Office Building, 502 East 9<sup>th</sup> Street  
Des Moines, IA 50319-0034

## SPECIAL EVENT APPLICATION AND PERMIT

UNDER 462A, 321G, & 321I CODE OF IOWA

Please read form before completing application.

Please TYPE or PRINT plainly.

NAME of event: \_\_\_\_\_

DATE of event: \_\_\_\_\_

TIME of event: \_\_\_\_\_  
(Start) (End)

LOCATION of event: \_\_\_\_\_

County: \_\_\_\_\_

River or Lake: \_\_\_\_\_  
(If on the Mississippi or Missouri River, include mile marker.)

Location of Boat Ramp: \_\_\_\_\_

Park: \_\_\_\_\_

Public or Private Property: \_\_\_\_\_

TYPES of vessels/vehicles: \_\_\_\_\_

Number of Participants: \_\_\_\_\_

Number of Spectators: \_\_\_\_\_

DESCRIPTION OF EVENT: \_\_\_\_\_

### DO NOT USE -- FOR OFFICIAL USE ONLY

#### Application Approved By:

Officer/Ranger: \_\_\_\_\_

Central Office: \_\_\_\_\_

#### Special Stipulations:

NAME/ADDRESS of Sponsoring Organization: \_\_\_\_\_

NAME/ADDRESS of Applicant: \_\_\_\_\_

TELEPHONE NUMBERS (home/business): \_\_\_\_\_

Will the event interfere with/impede the normal use of area by the public? \_\_\_\_\_

What extra/unusual hazard to spectators will be introduced into the event area? \_\_\_\_\_

Have any objections been received from other interested parties? \_\_\_\_\_

Number of vessels/vehicles provided by sponsoring organizations for safety assistance: \_\_\_\_\_

Does the sponsoring organization deem their patrol adequate for safe conduct of event? \_\_\_\_\_

Is State/Coast Guard Auxiliary assistance requested: \_\_\_\_\_

(Officer -- Specify/Include number of vessels.)

Location of applicant during event: \_\_\_\_\_



The undersigned applicant for a special event permit understands and agrees that neither the State of Iowa nor the Department of Natural Resources will be responsible for any injury to persons or damage to property arising out of incident to the activities which are the subject of this application. The undersigned applicant agrees by the execution hereof to indemnify and hold harmless the State of Iowa and the Department of Natural Resources against all liabilities, costs and expenses which may arise in consequence of the granting of this permit.

The undersigned has full authority to represent the sponsoring organization:

\_\_\_\_\_  
*Signature*

\_\_\_\_\_  
*Title*

\_\_\_\_\_  
*Complete Address:*

\_\_\_\_\_  
*Street*

\_\_\_\_\_  
*City*

\_\_\_\_\_  
*State*

\_\_\_\_\_  
*Zip Code*

- Please recheck the application to be sure all the required information is provided and is legible.
- Please adhere to the 30-day stipulation.
- Mail or deliver the completed application to the Park RANGER (if in a STATE park) or to the LOCAL STATE CONSERVATION OFFICER in charge of the area in which the event is to take place.
- Please keep the permit available during the event so you can, upon request, provide it to any Conservation Officer.

**QUESTIONS SHOULD BE DIRECTED TO:**

Rod Slings, Recreational Safety Programs Supervisor, Department of Natural Resources, 515/281-8652

**COMMENTS:**